

Doctors take NB government to court

Seven years, 7 presidents, 6 expert reports, 2 executive directors and 1 lawyer later, it's off to court they go. The Professional Association of Residents in the Maritime Provinces (PARI-MP) and 4 New Brunswick doctors are suing the provincial government, claiming that a physicians' resource management plan the health department introduced in 1992 infringes on 4 of their rights under the Canadian Charter of Rights and Freedoms. "This plan is so restrictive," says PARI-MP Executive Director Sandy Carew Flemming. "Essentially it restricts mobility for people [wishing] to enter the province and gives physicians already here an unfair advantage."

Under New Brunswick's plan, the province was divided into 7 health regions, each of which had a cap on the number of physicians allowed to practise. Since the plan was implemented 8 years ago, New Brunswick has suffered a shortage of doctors, says Carew Flem-

ming. "It's starting to get quite critical. The perception out there is that this is a closed province."

PARI-MP, which represents 370 residents in Atlantic Canada, is arguing that the government's resource management plan violates the charter in 4 areas: it restricts doctors' mobility, violates the concept of liberty as described in the charter, does not allow for free association and discriminates on the basis of sex. With respect to the latter claim, Carew Flemming notes that New Brunswick has approximately 1300 physicians, 1000 of whom are male. Fifty percent of medical school graduates are now female; PARI-MP argues that, because of the New Brunswick government's cap on physician numbers, female physicians have been, in essence, denied equal access to employment in New Brunswick. The government is arguing that under Section 1 of the charter, it has the legal right to restrict certain freedoms if

there are sound reasons for doing so.

The College of Physicians and Surgeons of New Brunswick has been named as a codefendant in the suit because of its licensing role. However, the college registrar, Dr. Ed Schollenberg, has also expressed concern about the government's resource management plan, and the college is seen as friendly to the plaintiff. Indeed, in 1996 the provincial government attempted without success to have the college removed as a party in the lawsuit.

Neither PARI-MP nor the 4 doctors involved in the lawsuit — all are now employed in New Brunswick — are asking for remuneration. Rather, they want the government's resource management plan declared illegal. The case, which is now being heard before a judge in the Court of Queen's Bench in Saint John, was expected to end Mar. 31, but a decision is not expected until this summer — at the earliest. — *Donalee Moulton, Halifax*

Doctor in the house? Project may open door to better care

House calls provide ideal opportunities for physicians to learn about patients, says Dr. Irene Cohen. The London, Ont., family physician is medical coordinator of Integrated Physician Services in the Home (IPSITH), a pilot project to provide home-based treatment for acutely ill patients who would otherwise be in hospital. She says physicians often discover issues during house calls that might not be detected during office visits.

Cohen recalls one patient who mixed her medications together in a fruit bowl because they were "pretty" and then used colour preferences when deciding which to take. On another occasion, Cohen visited a new elderly patient and found her living in her 1-bedroom apartment with only a bed, chair, tiny fridge and no food. The patient, who believed she was coping well since her husband's death a year earlier, was later diagnosed with Alzheimer's disease. Cohen says the patient likely would have presented herself



Dr. Irene Cohen with home care patient Alice Keukelaar

well during an office visit, creating delays in diagnosis and obtaining services. She thinks issues surrounding hygiene, family dynamics, spousal support and health are more readily apparent through house calls. "It's a definite eye-opener," she says.

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Cataract surgery contracted out in Vancouver

Vancouver's Lions Gate Hospital has cut its waiting list for cataract surgery by 30% and freed up operating room time by contracting some services to a private clinic close to the North Shore hospital. The 3-month contracts began on a trial basis last July and will be assessed later this year.

The Northmount Eye Surgery Centre is well positioned to accept the steady flow of about 85 low-risk patients a month, says Clay Adams, spokesman for the North Shore health region, especially since 5 of the hospital's 6 ophthalmologists practise there. The cost of \$550 per eye, which is paid by the hospital, includes an allowance for the clinic's overhead costs. Meanwhile, about 40 high-risk cataract operations are still performed at Lions Gate each month, but waiting times have dropped from almost 5 months to 3.

"It's going very well," says Adams.

"Our patients are being seen on a much more timely basis and there is potential to speed up access even more. The benefits well outweigh the costs. It is an access issue, not a cost issue." Since 15% of local residents are older than 65, Adams expects demand for surgery will continue to grow; the move also creates more OR time at Lions Gate, allowing about 60 extra operations a month.

The health region did not seek the provincial health ministry's permission to contract for the cataract services. "All we are doing is changing the location of where the patients receive their service," says Adams. "We are not contravening the Canada Health Act because procedures are not based on people's ability to pay." The ministry has not expressed any concern about the arrangement; precedents for contracting out other services have already been set with hospitals in Washington State.

Adams, who worked with the Alberta Ministry of Health when contracting out was introduced there, had been anticipating some public outcry over the new arrangement, but says the response has been uniformly positive. — *Heather Kent, Vancouver*

Care in the home

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Under IPSITH, acutely ill patients are receiving between 5 and 15 days of in-home care from a multidisciplinary community team that includes a case manager, nurse practitioner, the patient's family physician and health professionals from provider agencies (*CMAJ* 1999;161[11]:1437). Since April 1999, 39 FPs and nearly 40 specialists have agreed to participate in the program, which is expected to serve between 100 and 150 patients during the 2-year pilot period.

Cohen says house calls are not a thing of the past. She says a survey of London family physicians indicated that 60% to 70% of them make house calls; most involve elderly or severely disabled patients, but palliative care is becoming a larger part of home care. She says highly skilled teams of palliative care nurses in London offer tremendous assistance to family physicians. "It's become a real collaboration between all the team players to give [dying] patients optimum care in their homes."

As more and more people with significant illnesses and disabilities remain at home, Cohen foresees house calls becoming "absolutely necessary. We have to be more open to this kind of care. I hope the government looks at it that way as well." — *Lynne Swanson, London*



Dominique LaCasse, Wild West Communications

A humorous Year 2000 calendar has reaped big financial dividends for the Vernon Jubilee Hospital Emergency Department in Vernon, BC. About 5000 copies of the calendar, the brainchild of local doctors, were sold, raising \$25 000 for much-needed cardiac-monitoring equipment. Thanks to their efforts, community fundraising and a provincial grant, \$750 000 worth of monitors are now beeping away in Vernon. A series of brainstorming sessions led by family physician Bill Sanders resulted in the calendar's 12 humorous concepts. The most risqué photo, entitled "Say no to crack," showed 3 doctors modelling hospital gowns. In the photo above, surgeons John Crowley, Richard Creel and Ghee Hwang reveal the secret behind their cutting-edge surgical skills. "It would seem the citizens of Vernon appreciate seeing their medical role models in various states of undress and other humorous poses," says ER medical director Nick Balfour. The 2000 edition is sold out, but Sanders is devoting "1 or possibly 2 neurons" to concepts for a 2001 edition.